

Please type a plus sign (+) inside this box → ☐



HDP/SB/21 based on PTO/SB/21 (08-00)

AP
TSW

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|---|------------------------|--------------------------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 09/777,884 |
| | Filing Date | February 7, 2001 |
| | Inventor(s) | James A. JOHANSON et al. |
| | Group Art Unit | 2155 |
| | Examiner Name | Victor D. Lesniewski |
| | Attorney Docket Number | 29250-001020/US |

| ENCLOSURES (check all that apply) | | | | |
|--|--|--|---------|--|
| <input type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Letter to the Official Draftsperson and _____ Sheets of Formal Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> LETTER SUBMITTING APPEAL BRIEF AND APPEAL BRIEF (w/clean version of pending claims) <input checked="" type="checkbox"/> Appeal Communication to Group (<i>Notice of Appeal, Brief, Reply Brief</i>) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): | | |
| <table border="1"><tr><td>Remarks</td><td></td></tr></table> | | | Remarks | |
| Remarks | | | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | |
|--|----------------------------------|---------------------------------|--------------------|
| Firm or Individual name | Harness, Dickey & Pierce, P.L.C. | Attorney Name John E. Curtin | Reg. No. 37,602 |
| Signature | | | |
| Date | March 1, 2006 | | |

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MAIL STOP AF
RESPONSE UNDER
37 C.F.R. § 1.116
EXPEDITED PROCEDURE
EXAMINING GROUP _____

PATENT
29250-001020/US

IN THE U.S. PATENT AND TRADEMARK OFFICE

Applicant: James A. JOHANSON et al. Conf.: 3315
Appl. No.: 09/777,884 Group: 2155
Filed: February 7, 2001 Examiner: Victor D. Lesniewski
For: BLUETOOTH DEVICE POSITION DISPLAY
Docket No.: 29250-001020

NOTICE OF APPEAL FROM THE
PRIMARY EXAMINER TO THE BOARD OF APPEALS

Customer Service Window
Randolph Building
401 Dulany Street
Alexandria, VA 22314
Mail Stop AF

March 1, 2006

Sir:

Applicants hereby appeal to the Board of Appeals from the decision dated _____ of the Primary Examiner finally rejecting claims _____.

- ☐ The enclosed document is being transmitted via the Certificate of Mailing provisions of 37 C.F.R. § 1.8.
- ☐ The enclosed document is concurrently filed with a Pre-Appeal Brief Request for Review.

Applicants hereby petition for an extension of _____ () **month(s)** pursuant to 37 C.F.R. §§ 1.17 and 1.136(a).

The fee has been calculated as shown below:

03/02/2006 SZEWDIE1 00000023 09777884

01 FC:1401

500.00 DP

- ☐ NO extensions of time have been previously obtained for responding to the Final Rejection. Thus a fee of \$.00 is required for the full period of the above-requested extension of time.
- ☐ An extension of _____ () **month(s)** for responding to the Final Rejection was previously requested and paid for on _____. Thus a fee of \$ _____ is required.
- ☐ Applicant claims small entity status. See 37 C.F.R. § 1.27.

The Government fee for filing a Notice of Appeal to the Board of Appeals is calculated as follows:

- ☒ Large entity - \$500.00
- ☐ Small Entity - \$250.00

Therefore, the TOTAL FEE due for the filing of this Notice of Appeal is \$500.

Payment of the above TOTAL FEE is being made in the following manner:

- ☒ Check in the amount of \$500.00 is enclosed.
- ☐ Please charge Deposit Account No. 08-0750 in the amount of \$0.00. A triplicate copy of this sheet is attached.

If necessary, the Commissioner is hereby authorized in this, concurrent, and future replies, to charge payment or credit any overpayment to Deposit Account No. 08-0750 for any additional fees required under 37 C.F.R. §§1.16 or 1.17; particularly, extension of time fees.

Respectfully submitted,

HARNESS, DICKEY, & PIERCE, P.L.C.

By



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JEC:ame